

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: St. Augustine Port, Waterway, and Beach District Summer Haven River Restoration Project

2. Date of Submission: 11/14/2017

3. House Member Sponsor: Paul Renner

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes
If answer to 4a is ?No? skip 4b and 4c and proceed to 4d, Col. E
- b. What is the most recent fiscal year the project was funded? 2016-17
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)		
Column:	A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)
Input Amounts:					691,000	691,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2018-19? No

5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Environmental Protection

5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes

5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Performance measure of completely restoring the river for the final phase of the project; disbursement of funds over time to be withheld if river not restored.

6. Requester:

- a. Name: Elyse Kemper
- b. Organization: St. Augustine Port, Waterway & Beach District
- c. Email: elyse@bellsouth.net
- d. Phone #: (904)797-6660

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Michael Trudnak
- b. Organization: Taylor Engineering, Inc.
- c. Email: mtrudnak@taylorentengineering.com
- d. Phone #: (904)731-7040

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Mark Pinto
- b. Firm: The Fiorentino Group
- c. Email: mpinto@thefiorentinogroup.com
- d. Phone #: (941)773-9638

9. Organization or Name of entity receiving funds:

- a. Name: St. Augustine Port, Waterway & Beach District
- b. County (County where funds are to be expended): St. Johns
- c. Service Area (Counties being served by the service(s) provided with funding): St. Johns

10. What type of organization is the entity that will receive the funds? (Select one)

- ☐ For Profit
- ☐ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☐ Local Government
- ☐ University or College

Ⓞ Other (Please describe) Special State Taxing District

11. What is the specific purpose or goal that will be achieved by the funds being requested?

The funds will be used to complete the final phase of construction of the Summer Haven River Restoration Project which experienced significant construction setbacks, including a breach in the middle of construction and other unanticipated costs due to Hurricane Matthew and Hurricane Irma. Without the disruption of the storms, the restoration of the river would have been complete.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?0? if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	The funds will be paid to the construction contractor to complete project construction and to the District's Engineer for construction administration services.	691,000

TOTAL		691,000
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13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

- ☐ For Profit
- ☐ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☐ Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- ☐ State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- ☒ Other (Please describe): The restored Summer Haven River is in Florida state waters.

14. Is the project request an information technology project?

N/A

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

Friends of the Summer Haven River is a local organization that fully supports the project. This organization, together with support from the District, is largely responsible for the project occurring.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

No

17. Will the requested funds be used directly for services to citizens?

N/A

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
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<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	Re-establishment of the Summer Haven River's depth and circulation will restore water quality and salt marsh, oysters, and estuarine resources; return the historic water access; improve the overall quality of the River; enhance recreation.	Increased activity on the waterway; number of fisherman and oyster-men after restoration and contribution to the economy.
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input checked="" type="checkbox"/> Improve transportation conditions	Re-establishment of the Summer Haven River's depth and circulation will restore the historic water access.	Number of boaters and increased activity on the waterway.
<input checked="" type="checkbox"/> Increase or improve economic activity	Re-establishment of the Summer Haven River's depth and circulation will restore water quality and salt marsh, oyster, and estuarine resources; return the historic water access; and enhance recreation.	Number of fisherman and oyster-men after restoration of the river and contribution to the economy that once existed prior to the river being breached.
<input checked="" type="checkbox"/> Increase tourism	Re-establishment of the Summer Haven River's depth and circulation will provide access to residents and tourists for recreation.	Number of tourists and increased activity (e.g. boating) on the waterway.

<input checked="" type="checkbox"/> Create specific immediate job opportunities	Re-establishment of the Summer Haven River's depth and circulation will provide access to residents and local fisherman for oystering.	Number of fisherman and oyster-men after restoration of the river and contribution to the economy that once existed prior to the river being breached.
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	691,000	100.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No

4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	691,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

No

21. What is the revenue source of ongoing operating funds?

The District is funded by ad valorem taxes. There are no ongoing operating costs.

22. Has local approval been given for ongoing operating funds?

Yes

23. Have you applied for alternative state funding?

☐a. Wastewater Revolving Loan

☐b. Drinking Water Revolving Loan

☐c. Small Community Wastewater Treatment Grant

☒d. Other (Please describe): FDEP Beach Management Funding Assistance Program - submitted years ago.

☐e. N/A

24. Has project been addressed in a local, regional, or state plan?

Yes

24a. If Yes, insert plan name and cite page numbers.

St. Johns County Legislative Action Plan (page 6d).

25. Is the project for a financially disadvantaged community? (as defined in Chapter 62-552, F.A.C.)

No

26. What is the population economic status?

☐a. Financially Disadvantaged Municipality

☐b. Rural Area of Critical Economic Concern

☐c. Rural Community Experiencing Economic Distress

☒d. N/A

27. What is the status of planning?
☒ a. Ready
☐ b. Not Ready
28. What percentage of the planning process has been completed?
100
29. What is the estimated planning completion date?
9/15/2015
30. What is the status of design?
☒ a. Ready
☐ b. Not Ready
31. What percentage of design has been completed?
100
32. What is the estimated design completion date?
7/25/2016
33. List all required permits.
FDEP JCP, Department of the Army Permit, FWCC LISIT Permit
34. What is the status of permitting?
☐ a. Planned
☐ b. Submitted
☒ c. Received
35. What is the status of construction?
☒ a. Ready
☐ b. Not Ready
36. What percentage of construction has been completed?
85

37. What is the estimated completion date of construction?
8/31/2018